FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM :	D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR IINIFODM I IMITED OFFFDING FYEMPTION

	1455907	
۲	OMB APPROVAL	
	OMB Number:	
1	Expires:	
Į	Estimated average burden	
1	hours per response	

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

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Name of Offering (check if this is an	unendment and name	has changed, and	indicate o	hange.)	••	CEC Maria
Westminster CCRC Investors II LP					,	SEC Mail Processing
Filing Under (Check box(es) that apply):	□ Rule 504 □ Ru	le 505 🗵 Rule 50	6 □ Secti	on 4(6) 🔲 UL	OE	Section
Type of Filing: ☑ New Filing ☐ Amen						FFR n 4 7009
	A. 1	BASIC IDENTIF	TICATION	DATA		
1. Enter the information requested about	the issuer					Washington, DC
Name of Issuer (check if this is an an	endment and name h	nas changed, and i	ndicate cha	inge.)		111
Westminster CCRC Investors II LP (t	he "Issuer")	ر ۲				
Address of Executive Offices		(Number and Str	eet, City, S	tate, Zip Code)	Telephone Number (Including Area Code)
270 Westminster, Suite 300, Lake Ford	est, Illinois 60045				847-234-1123	
Address of Principal Business Operation	s	(Number and Str	eet, City, S	tate, Zip Code)	Teleph	
(if different from Executive Offices)				TOOLD	(1967)	611 61 20 6131 41 2 1661 1611 161 161 161 161 161 161 161
Brief Description of Business			PROC	しこういこり		
investments in continuing care retiren	ent communities		< MAD	9 2000		######################################
Type of Business Organization	•) MIAIN	2 2003		9002791
□ corporation	☑ limited partner ☐ limited partner	ship, already form	TORRAPE	/VI D島は起	(please specify):	
☐ business trust	☐ limited partner	ship, to be forme		MAKEOIE	10	
	•	Month	Year			
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organiza		0 3 (Enter two	0 8		Estimated abbreviation for State:	
		CN for Co	nada: EN 6	or other foreign	iurisdiction)	II II

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the daim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ General and/or Managing Partner ☐ Executive Officer □ Director Check Box(es) that Apply: ☐ Pronioter ☐ Beneficial Owner Full Name (Last name first, if individual) Westminster CCRC Advisors II LLC Business or Residence Address (Number and Street, City, State, Zip Code) 270 Westminster, Suite 300, Lake Forest, Illinois 60045 ☐ General and/or Managing Partner ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: Full Name (Last name first, if individual). Litchfield Advisors Incorporated Business or Residence Address (Number and Street, City, State, Zip Code) 270 Westminster, Suite 300, Lake Forest, Illinois 60045 ☐ Executive Officer □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ Executive Officer ☐ Director ☐ General and/or Managing Partner ☐ Promoter ☐ Beneficial Owner Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or Managing Partner ☐ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: □ Promoter Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or Managing Partner □ Director ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

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					В. 1	NFORMA	TION A	BOUT OF	FERING					
							-						Yes	No
1.	Has the	issuer sol	d, or does t	he issuer i	ntend to se	ell, to non-a	accredited	investors ir	this offer	ing?			🗅	×
					• • • • • • • • • • • • • • • • • • • •		-	iling under						
2.	What is the minimum investment that will be accepted from any individual?* (Lesser amounts may be accepted at the discretion of the general partner. Fractional interests of a unit may be purchased.)									\$ 1,00 0	,000 *			
	_												Yes	No
3.		_			•	•								
4.	similar is an as broker	remunerati sociated po or dealer.	ion for soli erson or ag	citation of ent of a bro n five (5)	purchaser: oker or dea persons to	s in connec aler register	tion with s red with th	ales of sec e SEC and	urities in the	ne offering	. If a persons, list the	commission on to be liste name of the may set forti	ed :	
Full Name	c (Last o	ame first,	if individus	d)				· · · · · · · · · · · · · · · · · · ·						
N/A														
Business	or Resid	ence Addre	ess (Numbe	r and Stre	et, City, S	tate, Zip Co	ode)							
Name of	Associat	ed Broker	or Dealer		-				·	. <u>-</u>				
States in \	Which P	erson Liste	d Has Soli	rited or In	ends to Sc	olicit Purch	asers						·	
(Che	ck "All	States" or	check indiv	idual State	s)		**************	•••••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***********	D A	Il States	
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	[MT]	(NE)	[NV]	[HN]	[1/1]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]	
	(RI)	(SC)	(SD)	[TN]	[TX]	(UT)	[TV]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]	
Full Name	e (Last n	ame first, i	if individua	1)				•		-				
Business (or Resid	ence Addre	ss (Numbe	and Stre	et, City, St	ate, Zip Co	ode)							
Name of A	Associat	ed Broker	or Dealer							<u> </u>		·		
States in V	Which Pe	erson Liste	d Has Solid	ited or In	ends to So	licit Purch	asers				···	<u>-</u>		
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	(RI)	[SC]	[SD]	[TN]	[TX]	(UT)	(VT)	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]	
Full Name	e (Last n	ame first, i	f individua	1)	.									
Business o	or Reside	nce Addre	ess (Numbe	r and Stree	et, City, St	ate, Zip Co	xde)		<u></u>					-
Name of A	Associate	d Broker	or Dealer				- <u></u>							·
States in V	Which Pe	rson Liste	d Has Solid	ited or Int	ends to So	licit Purch	asers							
			check indiv						***************************************			🗖 🛦	Il States	
	(AL)	{AK}	[AZ]	[AR]	[CA]	[CO]	{CT}	{DE}	{DC}	(FL)	{GA}	(HI)	[ID]	
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	[MT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]	
	[RI]	[SC]	[SD]	[TN]	(TX)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box I and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	<u>\$</u>	-0-	<u>\$</u>	-0
	Equity	<u>\$</u>	-0-	<u>\$</u>	-0-
	□ Common □ Preferred				
	Convertible Securities (including warrants)	<u>s</u>	-0-	<u>\$</u>	-0-
	Partnership Interests	<u>\$</u>	200,000,000	<u>\$</u>	86,575,000
	Other (Specify)	<u>\$</u>	-0-	S.	-0-
	Total	<u>\$</u>	200,000,000*	<u>\$</u>	86,575,000
Ans The	wer also in Appendix, Column 3, if filing under ULOE. offering may be expaned up to 20% at the discretion of the general partner				
2.	Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	ļ			
	in submit 15 field of Leid.				Aggregate
			Number		Dollar Amount
	Accredited Investors		Investors 51	S	of Purchases 86,575,000
	Accredited investors	-		<u>*</u>	50,373,000
	Non-accredited Investors	_	-0-	<u>\$</u>	-0-
	Total (for filings under Rule 504 only)	_	N/A	<u>\$</u>	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505	_		\$	
	Regulation A	_		<u>\$</u>	
	Rules 504	_		<u>\$</u>	
	Total	_		<u>\$</u>	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	••••	☑	<u> </u>	-0-
	Printing and Engraving Costs		Œ	<u> </u>	2,000
	Legal Fees		₹	<u> </u>	25,000
	Accounting Fees		₹	<u> </u>	-0-
	Engineering Fees				
	Sales Commissions (specify finders' fees separately)				
	Other Expenses (identify) filing fees				
	Total				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS $% \left(\mathbf{r}\right) =\left(\mathbf{r}\right)$

86,544,000

5.	of the purposes shown. If the amoun	justed gross proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and check the bethe payments listed must equal the adjusted gross proceeds to the istion 4.b above.	ox to					
					ayments to Officers, Directors, & Affiliates		P	ayments to Others
	Salaries and fees		×	<u>s</u>	-0-	Ø	<u>s</u>	-0-
	Purchase of real estate		X	<u>s</u>	-0-	X	<u>\$</u>	-0-
	Purchase, rental or leasing and insta	llation of machinery and equipment	X	<u>\$</u>	-0-	⊠	<u>\$</u>	-0-
	Construction or leasing of plant buil	X	<u>s</u>	-0-	×	<u>\$</u>	-0-	
		luding the value of securities involved in this offering that may be curities of another issuer pursuant to a merger)		<u>\$</u>	-0-	Ø	<u>\$</u>	-0-
	Repayment of indebtedness	Ø	<u>\$</u>	-0-	×	<u>\$</u>	-0-	
	Working capital	X		-0-	Ø	<u>\$</u>	<u>86,544,000</u>	
	Other (specify):	X		-0-	Ø	<u>\$</u>	-0-	
	Column Totals	X	<u>s</u>	-0-	×	<u>\$</u>	<u>86,544,000</u>	
	Total Payments Listed (column total			№ \$86,544,000				
		D. FEDERAL SIGNATURE						
constitu	tes an undertaking by the issuer to furn	gned by the undersigned duly authorized person. If this notice is fil nish to the U.S. Securities and Exchange Commission, upon written investor pursuant to paragraph (b)(2) of Rule 502.	ed ui requ	nder iest o	Rule 505, the	foll e inf	owin oma	g signature tion
Issuer (Print of Type)	Signature Date						
Westm	inster CCRC Investors II LP	Mush Sheir Janus	гу 2	9, 20				
Name o	f Signer (Print or Type)	Title of Signer (Print or Type)						
	Sherin	Authorized Signatory of Westminster CCRC Advisors		C 4	ha conarol n		~~ ~6	the Issuer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

